

Who I am: I am a 33-year survivor of a spinal cord injury (SCI) caused by a drunk driver and the Director of Operations & Business Development for Strength Training and Recovery Corporation, an intense, evidence-based spinal cord injury and amputee therapy program.

Who I represent: CAPP and CPAN

Concerns: Inadequate medical care for the severely injured.

I was 20 years old when a drunk driver changed my life. If given a choice of coverage, I would have chosen the lowest premium possible since at that young age I was no judge of its value and the impact the decision could have on me for the rest of my life. Fortunate for me, I had lifetime coverage at the time of my accident in 1980. We have the best coverage in the nation and its only 5% more in premiums than the national average. (\$493.56 MI - \$471.09 National Ave. = \$22.47 5%) To date, AAA has spent \$1,088,581 on my claim, not including BCBS's contribution, and I'm only 53 years old. I continue to need physical therapy; durable medical equipment, home and vehicle modifications and I count on my four hours of daily, intermittent attendant care to maintain full-time employment. As I age, I am confident that I will need more to sustain my level of function and lifestyle. If I require more than 56 hours per week, I would want to be assured that my husband, an unskilled caregiver, would continue to be paid for his hard work at a decent wage. A retroactive mandate is unconscionable. Survivors like me have existing supports allowing us to function as close to pre-morbid status as possible. Altering or removing supports could jeopardize survivor's employment, community access and the choice to live in our own homes.

The proposed caps on coverage and the likelihood of Michigan residents choosing the lowest premium put the citizens of our state in potential financial jeopardy if their life-long care exceeds the coverage they have chosen in case of a motor vehicle accident (MVA). Not only would they have to lose nearly everything to qualify for Medicaid, but their care would be drastically inferior due to an already over-burdened public health system. Shifting the cost of MVAs to the taxpayers is, in my opinion, misappropriation of funds.

The under-funding of medical treatment for severely injured accident survivors will result in thousands of jobs lost in that sector of Michigan's medical industry that serves these survivors.

Ann M. – SCI Survivor of 33 Years



**STRENGTH  
TRAINING  
& RECOVERY  
CORPORATION**

